MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)

10/574594 APR 04 2006
APPLICANT(S)

CLAIMS														
	AS FILED		AFTER CAMENDMENT		AFTER 2 MAMENDMENT			·	AS FILED		AFTER		AFTER	
	IND,	DEP.	IND.	DEP.	IND.	DEP.			IND.	DEP.	IND.	DEP.	IND.	
2		 		-/			İ	51			1,424	DEI.	MID.	DEP.
3				/		· ·		52 53	 		-			
5								54				i		
6		 -		/	<u></u>			_55						
7				/				56 57						
8								58						
10			/_					_59						
11	·		/				. 1	60 61						
12			/					62						
13								63						
15				7				64						
16 17				7				66						
18				-4-1				67						
19				-			ł	68 69						
20 21				7			t	70						
22				-/- -			Į	71 .						
_23							ŀ	72 73						
24 25				4				74						
26				/			- 1	75						
27								76 77						
28 29								78			-			
30					 -			79 80						
31 32							t	81						
33		-						82						
34							F	83 84						
35 36								85		<u> </u>				
37							-	86 87						
38							ŀ	88			-			
39 40								89						
41							-	90						
42							F	91 92						
43							F	93						
45					 -		- -	94 95						
46 47							F	96 -						
48								97						
49							J -	98 99						
50- TOTAL							-	100						
IND,		#	/	1		1	Γ	TOTAL IND.		I		i		
TOTAL		4 F	12	_		_	-	TOTAL		T		* _		▼
DEP.	ince	Shirt Selection and	12	7	•	7		DEP.	•	(=	•	(= 		
TOTAL CLAIMS			/3					TOTAL						
PTO - 1360	(REV. 11/04)			2007/10	E/43				U.8	S. DEPARTM	ENT of COM	MERCE		
		•						··	Pa	ient and Trad	emark Office			